



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Timothy J. Nichols Examiner: Unknown/Unassigned
Serial No. 09/431,881 Group Art Unit: 2766
Filing Date: November 2, 1999 Docket No.: P-8560.00
Title: Method and Apparatus to Secure Data Transfer From Medical Device Systems

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Please direct any response or inquiry to the below signed attorney. Examiner is
encouraged to call the undersigned counsel to facilitate resolve to this inquiry.

Dated: 12/06/99

Respectfully submitted,

By: Girma Wolde-Michael

Girma Wolde-Michael
Registration No. 36,724
MEDTRONIC, INC.
7000 Central Avenue NE
Minneapolis, MN 55432
Telephone: (612) 514-6402
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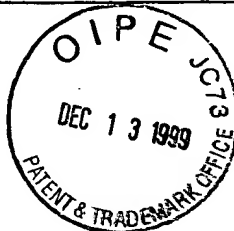
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/431,881	11/02/99	2766	\$2,188.00	P-8560.00	8	69	10

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7000 CENTRAL NE
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Applicant(s) TIMOTHY J. NICHOLS, LINO LAKES, MN.

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TITLE

METHOD AND APPARATUS TO SECURE DATA TRANSFER FROM MEDICAL DEVICE SYSTEMS

PRELIMINARY CLASS: 380

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LAW DEPARTMENT
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DATA ENTRY BY: RORIE, DEANNA

TEAM: 03 DATE: 11/17/99

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(See reverse for new important information)



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If you decide to keep the case, assign the request a paper number, endorse contents, punch holes in the documents, and replace the old Bib Data sheet with the updated version in the center of the file.

Your cooperation is greatly appreciated.

SERIAL NUMBER 09/431,881	FILING DATE 11/02/99	CLASS 380	GROUP ART UNIT 2766	ATTORNEY DOCKET NO. P-8560.00
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APPLICANT

TIMOTHY J. NICHOLS, LINO LAKES, MN.

****CONTINUING DOMESTIC DATA*******
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****371 (NAT'L STAGE) DATA*******
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****FOREIGN APPLICATIONS*******
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Initials</u> _____ <u>Initials</u> _____	STATE OR COUNTRY MN	SHEETS DRAWING 8	TOTAL CLAIMS 69	INDEPENDENT CLAIMS 10
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ADDRESS	MEDTRONIC INC 7000 CENTRAL NE MINNEAPOLIS MN 55432
TITLE	METHOD AND APPARATUS TO SECURE DATA TRANSFER FROM MEDICAL DEVICE SYSTEMS

FILING FEE RECEIVED \$2,188	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL

In re Application of: Timonth J. Nichols
For: Method and Apparatus to Secure Data Transfer From Medical Device Systems
Serial No.: 09/431,881
Filed: November 2, 1999

CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this TRANSMITTAL and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first class mail, addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231 on this 7th of December, 1999.

Signature

Karen L. Hoffman
Printed Name

Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal
- ☒ Request for Amendment of Filing Receipt
- ☒ Return Postcard

Applicant hereby petitions for a 0 month(s) extension of time. If an additional extension of time is required, please consider this a petition therefor.

☒ Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked on this Transmittal with regard to this filing. A duplicate of this transmittal is enclosed.

☒ Applicant believes that a 0 month extension of term is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.

Dated

Girma Wolde-Michael

Reg. No. 36,724
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